



## **King County Mental Health Chemical Abuse and Dependency Services Division 2002 Briefing Paper**

### **CRIMINAL JUSTICE IMPACTS ON THE MENTAL HEALTH SYSTEM**

#### **BACKGROUND:**

Since 1999 there have been significant efforts both at the state and local levels to increase access to mental health services for persons who are involved in the criminal justice system. There have been at least three Legislature-sponsored bills to provide funding and/or policy level support for the provision of community based mental health services for persons being released from state prisons. King County has implemented several local programs directed toward increasing access to mental health services for persons involved with local public safety or criminal justice authorities. The Crisis Triage Unit at Harborview Medical Center provides diversion from jail for individuals who commit misdemeanor crime due to their mental illness. King County has developed a Mental Health Court to facilitate access to and compliance with treatment for individuals who have been booked into King County jails for misdemeanor crimes. The result of these state and local initiatives is an increase in the number of offenders with mental illness who are being treated in the public mental health system, particularly in outpatient services. While these initiatives have demonstrated successful outcomes serving the mentally ill offender population (e.g. reduction in recidivism rates for offenders involved in treatment), there are still a number of issues/challenges for the community in providing services to this population.

#### **ISSUES/CHALLENGES:**

1. To be effective, the mentally ill offender population requires staffing within our community mental health provider network that has forensic experience. There is a limited number of outpatient provider staff with forensic experience.
2. The mentally ill offender population has traditionally been a challenging population to engage into services in the public mental health system where participation in treatment is voluntary and can only be mandated under the Involuntary Treatment Act (RCW 71.05).
3. Outpatient providers and the community have real concerns about safety as it relates to providing services to individuals with felony criminal histories in the community.
4. There are significant barriers to securing housing for the felony offender population as both public and private housing providers have prohibitions regarding housing felons. Since homelessness is a significant contributor to re-offense this is a critical issue/challenge for service provision.
5. Some of the insurance carriers for community mental health agencies have refused to provide liability insurance coverage for agencies who provide services to mentally ill offenders.
6. The costs to provide the services that promote successful outcomes for mentally ill offenders exceed traditional Medicaid outpatient payment rates. State funded pilot initiatives provide additional funding (over the Medicaid outpatient rates) for services to the mentally ill offender population. These additional dollars often go for housing and specialty treatments that are not typically part of public mental health benefits (e.g. sex offender treatment, substance abuse treatment).

#### **DATA:**

The State Department of Corrections estimates that approximately 450 mentally ill offenders are released from State prisons annually. Over 60% of those individuals release to King and Pierce Counties. King County expects to see approximately 125 mentally ill offenders released to our community during any given year.

#### **RECOMMENDATION/LEGISLATIVE ACTION:**

MHCADSD must continue to monitor issues related to provision of services to this high-risk population that is an ever-increasing part of the overall outpatient caseload, and work with the Legislature to adequately fund those services.